



# TERM CONTRACT EXEMPTION REQUEST

OFFICE OF MANAGEMENT AND BUDGET

CSD/STATE PROCUREMENT OFFICE

SFN 54202 (11-2004)

|                               |                  |                      |                 |              |
|-------------------------------|------------------|----------------------|-----------------|--------------|
| Name of Agency or Institution |                  | Business Unit Number | Tracking Number | Request Date |
| Contact Person                | Telephone Number | Fax Number           | Email Address   |              |

Identify the State Term Contract and Commodity or Service for Which an Exception is Requested

Describe the Reason Your Needs Cannot Be Met by the State Term Contract

Identify the Commodity, Service, and Vendor You Seek to Use in Lieu of the State Contract. Include the Quantity, Unit Price, and Total Dollar Value (Including any Options for Extensions or Renewals)

|           |            |                                                            |                    |
|-----------|------------|------------------------------------------------------------|--------------------|
| Commodity |            | Service                                                    | Vendor             |
| Quantity  | Unit Price | Options for Extensions or Renewals<br>No      Yes - Number | Total Dollar Value |

What are the Consequences if this Request is Denied?

## STATE CONTRACT ADMINISTRATOR APPROVAL

Instructions: Submit to the contract administrator listed on the State Procurement Office website.

Approved

Not Approved

Comments

|                         |           |      |
|-------------------------|-----------|------|
| Name (Printed or Typed) | Signature | Date |
|-------------------------|-----------|------|